

Kentucky Secretary of State
TREY GRAYSON

Division of Corporations
BUSINESS FILINGS

P.O. Box 718
Frankfort, KY 40602
(502) 564-2848
<http://www.sos.ky.gov/>

Amended Certificate of
Assumed Name

AAN

This certifies that the assumed name of:

[Name of record with the Secretary of State]]

has been amended to revise the real name of the partners or business organization holding the assumed name to:

[Real name – KRS 365.015(1)]

The certificate of assumed name was filed with the Secretary of State on: _____

The current principal office address is:

Street Address, if any

City

State

Zip Code

The principal office address is hereby changed to:

Street Address, if any

City

State

Zip Code

The certificate is effective upon filing unless a delayed effective date and/or time is specified: _____

The changes in the identity of the partners are as follows: _____

The amended certificate of assumed name is executed by:

(Signature)

(Signature)

(Type or Print Name)

(Type or Print Name)

Date

Date

Instructions:

Submit this form with one (1) exact or conformed copy. The filing fee is \$20.00. Please make your check payable to the "Kentucky State Treasurer".

